

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 763775	RECEIPT DATE:	02 / 26 / 01
IA NUMBER:	PCT/ JP00 / 06090	IA FILING DATE:	09 / 07 / 00
FAMILY NAME:	TSUFSUI	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	YUICHIRO	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	N	PRIORITY DATE:	00 / 00 / 00
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	10910/3	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

NAME: GREGORY H ZAYIA  
BRINKS HOFER GILSON & LIONE  
STREET: PO BOX 10395

CITY: CHICAGO  
STATE/COUNTRY: IL ZIP: 60610  
EMAIL:

APPLICATION TITLES:  
INFORMATION DISTRIBUTION SERVER SYSTEM, INFORMATION DISTRIBUTION METHO  
D, AND RECORDING MEDIUM

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 6334

<b>SERIAL NUMBER</b> 09/763,775	<b>FILING DATE</b> 02/26/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2161	<b>ATTORNEY DOCKET NO.</b> 10910/3	
<b>APPLICANTS</b> Yuichiro Tsufsui, Tokyo, JAPAN; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/JP00/06090 09/07/2000 <b>** FOREIGN APPLICATIONS *****</b> <div style="text-align: center;"><b>** SMALL ENTITY **</b></div>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 32	<b>TOTAL CLAIMS</b> 39	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Brinks Hofer Gilson & Lione PO Box 10395 Chicago , IL 60610					
<b>TITLE</b> Information distribution server system, information distribution method, and recording medium					
<b>FILING FEE RECEIVED</b> 671	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		